

1 of 19

RECEIVED
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2016 APR 12 AM 11:59

Office Use Only

FEC
FORM 3X

REPORT OF RECEIPTS
AND DISBURSEMENTS
For Other Than An Authorized Committee

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

I AM DYSLEXIA LLC

ADDRESS (number and street)

114318 COSETTE WAY N



Check if different
than previously
reported. (ACC)

Hugo

MN

55068-1990

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00586768

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:



April 15
Quarterly Report (Q1)



July 15
Quarterly Report (Q2)



October 15
Quarterly Report (Q3)



January 31
Year-End Report (YE)



July 31 Mid-Year
Report (Non-election
Year Only) (MY)



Termination Report
(TER)

(b) Monthly
Report
Due On:



Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11)
(Non-Election
Year Only)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12)
(Non-Election
Year Only)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on



in the
State of



(d) 30-Day
POST-Election
Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on



in the
State of



5. Covering Period



through

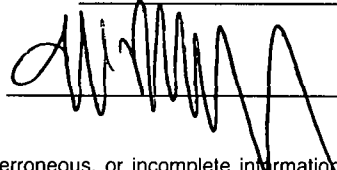


I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

JOSH BERGER

Signature of Treasurer



Date



NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2 of 14

Write or Type Committee Name

IWA Dyslexia LLC

Report Covering the Period:

From:

07 / 01 / 2015

To:

12 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		47010
(b) Cash on Hand at Beginning of Reporting Period.....	47010	
(c) Total Receipts (from Line 19).....	1087202	1087202
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1134212	1134212
7. Total Disbursements (from Line 31).....	516586	516586
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	618126	618126
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....		



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

Page 3 ~~05~~14

I Am Dyslexic LLC

12 / 31 / 2015

COLUMN B
Calendar Year-to-Date

20. Total Federal Receipts
(subtract Line 18(c) from Line 19)▶

898200

89502

1087702

1082702

00-01902

Two horizontal rulers are placed at the bottom of the page. The top ruler is marked in inches from 1 to 6. The bottom ruler is marked in centimeters from 1 to 15.



12 2 13




1087702

100-302-27

89800

189502

1087702




1082702

100-441702

Two horizontal rulers are placed below the text. The top ruler is marked in inches from 1 to 6. The bottom ruler is marked in inches from 1 to 12.

1 2 3



Technical drawing of a mechanical component, showing two views: a top view and a side view. The top view is a rectangle with a central slot and two circular holes on either side. The side view shows the component's profile with a central raised section and two lower sections. Dimensions are indicated by arrows and numbers.

52 52 52

1087702

1-500000

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4 of 19

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures	482552	482552
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	516586	516586
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements		
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	516586	516586
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	516586	516586

2016-04-12 PM 00:06:07

Page 5 0-14

2016-04-12-03-00062888

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 14

☒ 11a ☐ 11b ☐ 11c ☐ 12
13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

I AM Dyslexia LLC

Full Name (Last, First, Middle Initial)

A. SUZANNE BOWERS

Mailing Address

100 N WASHINGTON St. Ste 234
City Falls Church VA 22046

FEC ID number of contributing
federal political committee.

C

Name of Employer

DEATZ

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08/20/2015

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. OAKWOOD SCHOOL

Mailing Address

7210 BRADDOCK RD
City ANNANDALE VA 22003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09/03/2015

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. SUSAN DANKER

Mailing Address

14602 BATTERY ROAD LN
City Centreville MD 20120

FEC ID number of contributing
federal political committee.

C

Name of Employer

Reading & Language Learning

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09/29/2015

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1,000.00

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 2 OF 4

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11a	11b	11c	12	
13	14	15	16	17

NAME OF COMMITTEE (In Full)

I AM DYSLEXIA LLC

A. ELIZABETH TERMINELLA

1121 ORANGE Ct

McLean

State VA Zip Code 22101

Code 22101

MEDINAWELL

VP HR

☐ Primary ☐ General
☐ Other (specify) ▼

25000

MM / DD / 2015

25000

B. NATARIE HIGGS

431A W PENTENELL LN

200 H. T. Brown

State UT Zip Code 84009

Code
84009

C _____

SBA Complete

SBA UNDERWATER

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year to Date: 300.00

30000

c. The Beer Tax

Mailing Address 100 N. WASHINGTON ST.

Fans Chart

State VA Zip Code 22046

Code
220410

C _____

☐ Primary ☐ General
☐ Other (specify) ▼

09 / 04 / 2015

250.00

20000

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

I Am Dyslexia LLC

Full Name (Last, First, Middle Initial)

A. **WILSON LANGUAGE TRAINING CORP**

Mailing Address

47 OLD WOODSTOCK RD.

City

Oxford

State

MA

Zip Code

01540

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

200.00

Date of Receipt

10 / 06 / 2015

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. **TINELLE KUGLIN**

Mailing Address

10364 Baldwyn Creek Rd

City

Maple Grove

State

MN

Zip Code

55369

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

372.00

Date of Receipt

09 / 29 / 2015

Amount of Each Receipt this Period

372.00

Full Name (Last, First, Middle Initial)

C. **RUN SIGN UP**

Mailing Address

200 Mill St, Ste 200

City

Woodstown

State

NJ

Zip Code

08051

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5020.00

Date of Receipt

09 / 29 / 2015

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2970.00

2970.00

2016-04-12 PM 00:00:00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 9 OF 14	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)

I AM Dyslexia LLC

Full Name (Last, First, Middle Initial)

A. Dan Sign Up

Mailing Address

300 Mill St, Ste 200

City

Moorestown

State

NJ

Zip Code

08057

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5020.00

Date of Receipt

09 / 30 / 2015

Amount of Each Receipt this Period

480.00

Full Name (Last, First, Middle Initial)

B. Dan Sign Up

Mailing Address

300 Mill St, Ste 200

City

Moorestown

State

NJ

Zip Code

08057

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5020.00

Date of Receipt

10 / 06 / 2015

Amount of Each Receipt this Period

1085.00

Full Name (Last, First, Middle Initial)

C. Dan Sign Up

Mailing Address

300 Mill St, Ste 200

City

Moorestown

State

NJ

Zip Code

08057

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5020.00

Date of Receipt

10 / 15 / 2015

Amount of Each Receipt this Period

1530.00

SUBTOTAL of Receipts This Page (optional).....▶

3095.00

TOTAL This Period (last page this line number only).....▶

2016-04-12 PM 00:06:28

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

PAGE 1 OF 4

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NAME OF COMMITTEE (In Full)

I Am Business LLC

Full Name (Last, First, Middle Initial)

A. *Run Sign Up*

Mailing Address

300 Mill St, Ste 200

City

Moorestown

State

NJ

Zip Code

08057

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502000

Date of Receipt

10 / 19 / 2015

Amount of Each Receipt this Period

98500

Full Name (Last, First, Middle Initial)

B. *Run Sign Up*

Mailing Address

300 Mill St, Ste 200

City

Moorestown

State

NJ

Zip Code

08057

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502000

Date of Receipt

10 / 19 / 2015

Amount of Each Receipt this Period

46500

Full Name (Last, First, Middle Initial)

C. *LFMW, INC*

Mailing Address

1321 Leslie Ave

City

Alexandria

State

VA

Zip Code

22301

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

134000

Date of Receipt

09 / 09 / 2015

Amount of Each Receipt this Period

100000

SUBTOTAL of Receipts This Page (optional).....▶

245000

TOTAL This Period (last page this line number only).....▶

245000

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 14

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

I Am Dyslexia LLC

Full Name (Last, First, Middle Initial)

A. LFMW, INC

Mailing Address

1321 Leslie Ave

City

Alexandria

State

VA

Zip Code

22301

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1340.00

Date of Receipt

10/26/2013

Amount of Each Receipt this Period

340.00

Full Name (Last, First, Middle Initial)

B. EAGLE BANK

Mailing Address

4815 Woodmont Ave

City

Bethesda

State

MD

Zip Code

20814

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09/09/2013

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. DC 2DA

Mailing Address

501 McCann Dr.

City

Rockville

State

MD

Zip Code

20850

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09/29/2013

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....▶

840.00

TOTAL This Period (last page this line number only).....▶

8982.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 4

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

I AM DYSLEXIA LLC

Full Name (Last, First, Middle Initial)

A. Autiborne.NET

Mailing Address

PO Box 8999

City

SAN FRANCISCO

State

CA

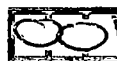
Zip Code

94128

Purpose of Disbursement

CREDIT CARD Fees

Candidate Name



Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

11/03/2013

Amount of Each Disbursement this Period

2500

B. Fairfax County Park Authority

Mailing Address

12055 Government Center Pkwy

City

Fairfax

State

VA

Zip Code

22035

Purpose of Disbursement

Park Renovation

Candidate Name



Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

10/26/2013

Amount of Each Disbursement this Period

21031

C. Liza Irons

Mailing Address

1219 Timber Ln

City

Fairfax County VA

State

Zip Code

22046

Purpose of Disbursement

Office Supplies

Candidate Name



Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

10/26/2013

Amount of Each Disbursement this Period

24600

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

48131

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE **19** OF **19**

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

A. **KAROL ATKINSON**

Date of Disbursement

11 / 17 / 2015

Mailing Address **5530 Windsor Way**

City **JANSPURGH** State **UT** Zip Code **84074**

Purpose of Disbursement **Hair Rental**

Candidate Name

001

Category/
Type

Amount of Each Disbursement this Period

418.00

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. **JOSH BERGER**

Date of Disbursement

11 / 17 / 2015

Mailing Address **14518 Cora He Way N**

City **Hugo** State **MIN** Zip Code **55038**

Purpose of Disbursement **Supplies**

Candidate Name

001

Category/
Type

Amount of Each Disbursement this Period

912.28

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. **WUTPRIZE.NET**

Date of Disbursement

12 / 02 / 2015

Mailing Address **PO Box 8999**

City **SAN FRANCISCO** State **CA** Zip Code **94128**

Purpose of Disbursement **Credit card fees**

Candidate Name

001

Category/
Type

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

1355.28

TOTAL This Period (last page this line number only).....▶

4399.21

0000000000 1 2 0 1 2 1 4 0 1 6 1 0 0 0 0

PRESS FIRMLY TO SEAL

PRESS FIRMLY TO SEAL

PRIORITY MAIL [®] ★

DATE OF DELIVERY SPECIFIED*

USPS TRACKING™ INCLUDED*

INSURANCE

PICKUP AVAILABLE

* Domestic

Expected Delivery Day: 04/08/2016

USPS TRACKING NUMBER




9505 5132 8592 6097 0465 47

USED INTERNATIONALLY,
TOMS DECLARATION
MAY BE REQUIRED.


FROM: I am Dyslexia
14318 Cassette Way N
Hugo, MN 55038

TO:

Federal Election Commission
999 E. Street NW
Washington, DC 20463



U.S. POSTAGE
PAID
MINNEAPOLIS, MN
55403
APR 08, 16
AMOUNT
\$6.45
R2304Y122951-12



20463

1006

RECEIVED
FEB MAIL CENTER
2016 APR 12 AM 11:59

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EPI4F July 2013



Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input checked="" type="checkbox"/> USPS Priority Mail	Postmarked 4/6/16
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


PREPARER

4/12/16
DATE PREPARED

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